PTO/SB/06 (8-96)
Approved for use through 9/30/98. OMB 0651-0032
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DATERNE A DRIVE A DRIVE A DRIVE A DRIVER A DRIVE PATENT APPLICATION FEE DETERMINATION RECORD OTHER THAN CLAIMS AS FILED - PART I **SMALL ENTITY** OR **SMALL ENTITY** (Column 2) (Column 1) **NUMBER EXTRA** FOR NUMBER FILED RATE FEE **RATE** FEE **BASIC FEE** s 395 OR \$ (37 CFR 1.16(a)) TOTAL CLAIMS x \$11 0 0 20 minus 20 = OR (37 CFR 1.16(c)) INDEPENDENT CLAIMS 0 x 41 =0 minus 3 = OR 3 (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR 395 OR **TOTAL** TOTAL * If the difference in column 1 is less then zero, enter "0" in column 2 OTHER THAN CLAIMS AS AMENDED - PART II SMALL ENTITY OR SMALL ENTITY (Column 2) (Column 3) (Column 1) **CLAIMS HIGHEST** ADDI-ADDI-REMAINING PRESENT NUMBER RATE TIONAL **RATE** TIONAL AMENDALIN **AFTER** PREVIOUSLY **EXTRA** FEE FEE AMENDMENT PAID FOR OR) Total ** 31 = 29 Minus x \$_25 <u>50</u> = (37 CFR 1.16(c)) OR Independent 3 Minus 700 = 100 = (37 CFR 1.16(b)) 'nR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) 180 OR 360= TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 2) (Column 3) (Column 1) **CLAIMS** HIGHEST ADDI-ADDI-AMENDATION REMAINING NUMBER PRESENT RATE TIONAL **RATE** TIONAL AFTER PREVIOUSLY **EXTRA** FEE FEE PAID FOR AMENDMENT OR Total = Minus (37 CFR 1.16(c)) OR *** Independent = Minus OR (37 CFR 1.16(b)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 3) (Column 2) (Column 1) **CLAIMS HIGHEST** ADDI-ADDI-REMAINING **NUMBER** PRESENT RATE TIONAL TIONAL RATE AMENDMENT **AFTER** PREVIOUSLY **EXTRA** FEE FEE AMENDMENT PAID FOR OR Total x \$ Minus = (37 CFR 1.16(c)) OR *** Independent = Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR TOTAL TOTAL OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ADDIT, FEE ADDIT. FEE ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.